PTO/88/22 (08-03)

Approved for use through 731/2003. Ones 68514005 U.S. Petent and Tradement Office; U.S. DEPARMENT OF COMMERCE U.S. Petent and Tradement Reduction Act of 1895. No control way required to respond to a cotection or reformation undess it displays a valid OMS control number

PETITION FOR EXTENSION OF TIME UNDER	R 37 CFR 1.136(a)	cket Number (C	Optional) PHLY-25,340	R	ECEN	( CENTER
in ne Application of . Citily by						_
A	Application Number 09/659;		Filed 09/11/2000		AOS	<del>`</del>
F	For Accessing a Vendir Web Site Using Personal Accessrs interrestion Relational from a Credit Card Company Web Site					
A	Art Unit 3625	Examiner i	Mark A. Fadok			
This is a request under the provisions of 37 CFR 1.1 application.	36(a) to extend the period fo	r filing a reply	in the above identified		1	
The requested extension and appropriate non-small-	entity fee are as follows (che	ck time perio	d desired):			
One month (37 CFR 1.17(a)(1))			\$	<del></del>		
Two months (37 CFR 1.17(a)(2))			\$			
Three marths (37 CFR 1.17(a)(3))			ş <u>980.00</u>	<del>.</del>		
Four months (37 CFR 1.17(a)(4))			\$			
Five months (37 CFR 1.17(a)(5))			\$ <u>-</u>	<del></del> ;		
Applicant claims small entity status. See 37 Cl half, and the resulting fee is: \$490.00	FR 1_27. Therefore, the fee e	mount shown	above is reduced by o	ne-		
A check in the amount of the fee is enclose	sed.					
Peyment by credit card. Form PTO-2038	is attached.					
The Director has already been authorized		lication to a	Decosit Account.			•
				uant		
The Director is hereby authorized to chan to Deposit Account Number 20-0780794LY		10401100, 01	Ground arry Group Cyri	,		
I have enclosed a duplicate copy of this s	heet.				•	
I am the applicant/inventor.					:	•
assignee of record of the Statement under 37 C	entire interest. See 37 CF CFR 3.73(b) is enclosed (F	R 3,71. om PTO/SE	3/98).		. :	•
	rd. Registrätion Number 💆				·	
attorney or agent under 3 Registration number if actin						
WARNING: Information on this form may be on this form. Provide credit card informatio	scome public. Credit card info	adition arround	not be included			•
Melnic		Smal		•		
Date		Signe	··· erum			
972-680-6050	Gregory M.	Howison				•
Telephone Number		Typed or pri			g	<b>.</b>
NOTE: Signatures of all the invanture or essigneds of record of the signature jurisquired, see below.	entire interest or their representative	(s) are required. (	Submit multiple forms if more	Susti cum.	٤	3 2 2
	ere submitted.				9170	<b>?</b>
Très colention of information is fiquited by 37 CFR 1.136(a). The Ind USPTO to process) an application. Confidentiality is governed by 35 including agribering, preparing, and submetting the occapitated applica on the emount of time you require to complete this form swelfer stage and Tradoment Office, U.S. Department of Continons, P.O. Box 145 ADDRESS, SEMD TO: Commissioner for Patients, P.O. Box 145	5 U.S.C. 122 and 57 CER 1.14. This rijon form to the USPTO. Time will ve restions for reducing this bunden, after 60, Alexandria, VA 22313-1460. DO	collection is estim by departiting upo dd be east to the	istad to take 6 minutes to com in the individual case. Arryst Chief information Officar, U.S	igioto, miniento L Patint	00000055 09659170	
	pleting the form, call 1-800-PTO-0199	end-satect opdor	2.		8. 8	•

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